FORM 1		STATEM	ENT OF		2013		
Please print or type your name, mailing address, agency name, and position below	w:	FINANCIAL	INTEREST	rs [FOR OFFICE USE ONLY:		
LAST NAME - FIRST NAME - MIDDL		: BEAT- WILL	sı				
MATLING ADDRESS: 1,0,Box 197	 /				ين		
					\$P 2		
BOCA GRANDE	ZIP: 339	COUNTY:			14APR14PM0343 SDE LEE CUF		
NAME OF AGENCY: BOCA GRANDEHISTO	RUS	POESENATION	DOSNO		43 S)		
NAME OF OFFICE OR POSITION HEI				E E			
You are not limited to the space on the lim	es on thi	if necessary.		2			
CHECK ONLY IF CANDIDATE	OR	NEW EMPLOYEE OR AF	PPOINTEE				
DISCLOSURE PERIOD: THIS STATEMENT REFLECTS YOUR FINANCIAL INTERESTS FOR THE PRECEDING TAX YEAR, WHETHER BASED ON A CALENDAR YEAR OR ON A FISCAL YEAR. PLEASE STATE BELOW WHETHER THIS STATEMENT IS FOR THE PRECEDING TAX YEAR ENDING EITHER (must check one): DECEMBER 31, 2013 OR SPECIFY TAX YEAR IF OTHER THAN THE CALENDAR YEAR: MANNER OF CALCULATING REPORTABLE INTERESTS: FILERS HAVE THE OPTION OF USING REPORTING THRESHOLDS THAT ARE ABSOLUTE DOLLAR VALUES, WHICH REQUIRES FEWER CALCULATIONS, OR USING COMPARATIVE THRESHOLDS, WHICH ARE USUALLY BASED ON PERCENTAGE VALUES (see instructions for further details). CHECK THE ONE YOU ARE USING: COMPARATIVE (PERCENTAGE) THRESHOLDS OR DOLLAR VALUE THRESHOLDS							
PART A PRIMARY SOURCES OF IN	ICOME	[Major sources of income to the	e reporting person - See i	nstructions)			
NAME OF SOURCE OF INCOME		SOU	SOURCE'S ADDRESS		DESCRIPTION OF THE SOURCE'S PRINCIPAL BUSINESS ACTIVITY		
SWPSC		700 51St STSG		SELFSTOMKEFACILITY			
MHUC		DOB1971 BOCA	6rzudo FZ	RE INVESTMENTS			
APA INESTMENTS		28AL SKIMMEN	77. BUD 33707	DE	LTAZS		
PART B — SECONDARY SOURCES (Major customers, clients, a (If you have nothing to re	nd other	sources of income to business	ses owned by the reporting	g person - Se	e instructions]		
NAME OF BUSINESS ENTITY	NAME OF MAJOR SOURCES OF BUSINESS' INCOME		ADDRESS OF SOURCE		PRINCIPAL BUSINESS ACTIVITY OF SOURCE		
P/A							
PART C — REAL PROPERTY [Land, buildings owned by the reporting person - See instructions] (If you have nothing to report, write "none" or "n/a")				FILING INSTRUCTIONS for when and where to file this			
Sulsc-700 515	57.	+		are located at the bottom ge 2.			
Paralsians Loc	312	PLAFFERT		RUCTIONS on who must			
YALMISLAND LOC	i pe	GRANDE	file this form and how to fill it out begin on page 3.				

(If you have nothing to report, write "none	•					
TYPE OF INTANGIBLE	BUSINESS ENTITY TO WH	ICH THE PROPERTY RELATES				
\mathcal{P}/\mathcal{A}						
N. C.						
		and the state of t				
PART E — LIABILITIES [Major debts - See instructions] (If you have nothing to report, write "none						
NAME OF CREDITOR	ADDRESS	OF CREDITOR PROCESS				
Nore		72				
**						
-	· · · · · · · · · · · · · · · · · · ·	 _				
DART C WITCHESTS IN ORDERING DUSINGS OF STREET						
PART F — INTERESTS IN SPECIFIED BUSINESSES [O (If you have nothing to report, write "none" (or "n/a")	īn -				
MANUE OF BUCKIEGO ENTITA	BUSINESS ENTITY # 1	BUSINESS ENTITY #2				
NAME OF BUSINESS ENTITY	<u> </u>	BUSINESS ENTITY # 2				
ADDRESS OF BUSINESS ENTITY	·	<u> </u>				
PRINCIPAL BUSINESS ACTIVITY						
POSITION HELD WITH ENTITY						
I OWN MORE THAN A 5% INTEREST IN THE BUSINESS						
NATURE OF MY OWNERSHIP INTEREST						
***	E CONTINUED ON A SEPARATE SHEI					
SIGNATURE (required): DATE SIGNED (required):						
Metoeaule	4/10/14					
If a certified public accountant licensed under Chapte	er 473, or attorney in good standing with the	Florida Bar prepared this form for you, he or				
she must complete the following statement:						
the instructions to the form. Upon my reasonable kno	, prepared the CE Form 1 in accordance owledge and belief, the disclosure herein is tr	e with Section 112.3145, Florida Statutes, and ue and correct.				
Signature		Date				
	EILING INGENIGATIONS					
WHAT TO FILE: W	FILING INSTRUCTIONS: HERE TO FILE:	WHEN TO FILE:				
THIS IN FIEL.	HENE IV FILE.	WINCH IO FILE:				

After completing all parts of this form, including signing and dating it, send back only the first sheet (pages 1 and 2) for filling.

If you have nothing to report in a particular section, you must write "none" or "n/a" in that section(s).

NOTE:

MULTIPLE FILING UNNECESSARY:

Generally, a person who has filed Form 1 for a calendar or fiscal year is not required to file a second Form 1 for the same year. However, a candidate who previously filed Form 1 because of another public position must at least file a copy of his or her original Form 1 when qualifying.

If you were mailed the form by the Commission on Ethics or a County Supervisor of Elections for your annual disclosure filing, return the form to that location.

Local officers/employees file with the Supervisor of Elections of the county in which they permanently reside. (If you do not permanently reside in Florida, file with the Supervisor of the county where your agency has its headquarters.)

State officers or specified state employees file with the Commission on Ethics, P.O. Drawer 15709, Tallahassee, FL 32317-5709; physical address: 325 John Knox Road, Building E, Suite 200, Tallahassee, FL 32303.

Candidates file this form together with their qualifying papers.

To determine what category your position falls under, see the "Who Must File" Instructions on page 3.

Facsimiles will not be accepted.

initially, each local officer/employee, state officer, and specified state employee must file within 30 days of the date of his or her appointment

or of the beginning of employment. Appointees who must be confirmed by the Senate must fife prior to confirmation, even if that is less than 30 days from the date of their appointment.

Candidates for publicly-elected local office must file at the same time they file their qualifying papers.

Thereafter, local officers/employees, state officers, and specified state employees are required to file by July 1st following each calendar year in which they hold their positions.

Finally, at the end of office or employment, each local officer/employee, state officer, and specified state employee is required to file a final disclosure form (Form 1F) within 60 days of leaving office or employment. However, filing a CE Form 1F (Final Statement of Financial Interests) does not relieve the filer of filing a CE Form 1 if he or she was in their position on December 31, 2013.

ķ.

?

Address	Column3	Improvement	Column 1	Column2	
5126-46 Gulfport Blvd	Gulíport, FL 33707	Office bldg			
5220 29th Ave S	Gulfport, FL 33707 Single family rental				
2424 Union St	St. Petersburg,FL	Apartment bld	9		
2900 45th St 5	Gulfport, FL 33707	Condo rental			
5121 Tangerine Ave	Gulfport, FL 33707	Single family rental			
5325 13th Ave S	Gullport, FL 33707	Single family i	rental		

Robert W Caldwell III P.O. Box 1971 Boca Grande, FL 33921 FT MYERS FL 339
10 MFR 2014 FM 41

Lee County Public Resources P.O. Box 398 Ft. Myers, FL 33902-0398 Election Office

140033730SEVEONAD TOUR Kim Kirton

33902039898

իվերիակերկիրկիրկիրկիակերիի